

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED  
2014 OCT 20 AM 10:08  
FEC MAIL CENTER  
Office-Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

INDIANA REPUBLICAN ASSEMBLY

ADDRESS (number and street)

PO Box 721



Check if different  
than previously  
reported. (ACC)

BEECH GROVE

IN

46107

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00522474

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15  
Quarterly Report (Q1)



July 15  
Quarterly Report (Q2)



October 15  
Quarterly Report (Q3)



January 31  
Year-End Report (YE)



July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)



Termination Report  
(TER)

(b) Monthly  
Report  
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)  
(Non-Election  
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)  
(Non-Election  
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on



in the  
State of



(d) 30-Day  
POST-Election  
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on



in the  
State of



5. Covering Period



2014

through



2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

J D MINIEAR

Signature of Treasurer

J D Miniear

Date



2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

Report Covering the Period:

From:

07 01 2014

To:

09 30 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2014</u>		<u>120</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>2217</u>	
(c) Total Receipts (from Line 19) .....	<u>180251</u>	<u>472551</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<u>182468</u>	<u>477727</u>
7. Total Disbursements (from Line 31) .....	<u>182051</u>	<u>477310</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<u>417</u>	<u>417</u>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<u>1884375</u>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**INDIANA REPUBLICAN ASSEMBLY SUPER PAC**

Report Covering the Period:

From:

07' 01' 2014

To:

09' 30' 2014

## **I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

### 11. Contributions (other than loans) From:

#### (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

159000

412400

(ii) Unitemized.....

21251

65157

(iii) TOTAL (add  
Lines 11(a)(i) and (ii).....▶

180251

477557

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACs).....

(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5).....▶

180251

477557

### 12. Transfers From Affiliated/Other Party Committees.....

### 13. All Loans Received.....

### 14. Loan Repayments Received.....

### 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

### 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

### 17. Other Federal Receipts (Dividends, Interest, etc.).....

### 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

### 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

180251

477557

### 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

180251

477557

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	182051	348910
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	182051	348910
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		128400
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	182051	477310
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	182051	477310

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	180251	477557
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	180251	477557
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	182051	348910
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	182051	348910

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE	OF
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

Full Name (Last, First, Middle Initial) A. MINIER, JD		Date of Receipt 07/14/2014
Mailing Address 112 S 17TH AVE		Amount of Each Receipt this Period 1,000.00
City BEECH GROVE	State IN Zip Code 46107	
FEC ID number of contributing federal political committee. IC		
Name of Employer CROWNMARK GROUP	Occupation FINANCE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2,100.00

Full Name (Last, First, Middle Initial) B. MINIER, JD		Date of Receipt 09/16/2014
Mailing Address 112 S 17TH AVE		Amount of Each Receipt this Period 340.00
City BEECH GROVE	State IN Zip Code 46107	
FEC ID number of contributing federal political committee. C		
Name of Employer CROWNMARK GROUP	Occupation FINANCE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2,440.00

Full Name (Last, First, Middle Initial) C. RICHARD GARRET		Date of Receipt 09/30/2014
Mailing Address 1133 TIMBER GROVE PL		Amount of Each Receipt this Period 250.00
City BEECH GROVE	State IN Zip Code 46107	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1,590.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐  
 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b ☐

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

Full Name (Last, First, Middle Initial)

A. RICK TRADER

Date of Disbursement

07/19/2014

Mailing Address

766 MAPLE RD

City

DEPTFORD

State

NJ

Zip Code

08096

Purpose of Disbursement

RADIO SHOW

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. SKELTER

Date of Disbursement

07/15/2014

Mailing Address

4027 KENTUCKY AVE

City

INDIANAPOLIS

State

IN

Zip Code

46221

Purpose of Disbursement

INSURANCE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

119.83

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. STAPLES

Date of Disbursement

07/21/2014

Mailing Address

5140 E SOUTHPORT RD

City

INDIANAPOLIS

State

IN

Zip Code

46237

Purpose of Disbursement

SUPPLIES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.99

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1135.82

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

Full Name (Last, First, Middle Initial)

A. SHOPPERS WORLD

Date of Disbursement

07 28 2014

Mailing Address

3700 S EAST ST

City

INDIANAPOLIS

State

IN

Zip Code

46227

Purpose of Disbursement

SUPPLIES

Candidate Name

Amount of Each Disbursement this Period

225

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. MARATHON

Date of Disbursement

08 10 2014

Mailing Address

1638 S SHELBY ST

City

INDIANAPOLIS

State

IN

Zip Code

46203

Purpose of Disbursement

GAS

Candidate Name

Amount of Each Disbursement this Period

16.00

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. FIFTH THIRD BANK

Date of Disbursement

09 11 2014

Mailing Address

11662 COMMERCE DR

City

FISHERS

State

IN

Zip Code

46038

Purpose of Disbursement

SERVICE CHARGES

Candidate Name

Amount of Each Disbursement this Period

0217

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8042

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

Full Name (Last, First, Middle Initial)

A.

FIFTH THIRD BANK

Mailing Address

11402 COMMERCIAL DR

City

FISHERS

State

IN

Zip Code

46038

Purpose of Disbursement

FEES

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

09/15/2014

Amount of Each Disbursement this Period

197.00

B.

SPEEDWAY

Mailing Address

105 CHURCHMAN AVE

City

BEECH GROVE

State

IN

Zip Code

46107

Purpose of Disbursement

GASOLINE - QTRLY

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

09/15/2014

Amount of Each Disbursement this Period

58.01

C.

GODADDY

Mailing Address

14455 N HAYDEN ROAD

City

SCOTTSDALE

State

AZ

Zip Code

85260

Purpose of Disbursement

WEBSITE

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

09/19/2014

Amount of Each Disbursement this Period

29.97

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2019.8

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

Full Name (Last, First, Middle Initial)

A. COMCAST / UTILITIES

Date of Disbursement

07 29 2014

Mailing Address

4112 CONCEPT DR

City

PLYMOUTH

State

MI

Zip Code

48170

Purpose of Disbursement

INTERNET

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

319.29

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

319.29

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE **OF**  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

**INDIANA REPUBLICAN ASSEMBLY SUPER PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**MOORE, JENNIE**

Election:

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address

**201 LANTERN ROAD**

City

**INDIANAPOLIS**

State

**IN**

ZIP Code

**46250**

Original Amount of Loan

**11,000.00**

Cumulative Payment To Date

Balance Outstanding at Close of This Period

**11,000.00**

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

**11/15/2012 12/31/2015**

% (apr)

☐ Yes

☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

**SUBTOTALS** This Period This Page (optional).....▶

**TOTALS** This Period (last page in this line only).....▶

**11,000.00**

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3X)

## LOANS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE OF  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

LOAN SOURCE Full Name (Last, First, Middle Initial)

GEORGE HERMS

Election:

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address

259 SLOUX CIRCLE

City

NOBLESVILLE

State

IN

ZIP Code

46062

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

800.00

800.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03

12

2013

06

30

2015

% (apr)

☐ Yes

☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

800.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE OF  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

LOAN SOURCE Full Name (Last, First, Middle Initial)

BROWN, DONNA M

Election:

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address

5720 PORT AU PRINCE AVE, APT 13

City INDIANAPOLIS

State IN

ZIP Code 46224

Original Amount of Loan

70000.00

Cumulative Payment To Date

1172.53

Balance Outstanding at Close of This Period

5827.67

**TERMS**

Date Incurred

06/20/2013

Date Due

07/01/2016

Interest Rate

% (apr)

Secured:

☒ Yes

☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

SUBTOTALS This Period This Page (optional).....▶

TOTALS This Period (last page in this line only).....▶

5827.67

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

140M-1M2-00-19

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE **OF**  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

**INDIANA REPUBLICAN ASSEMBLY SUPER PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**BROWN, DONNA M**

Election:

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address

**5720 PORT AN PRINCE AVE, APT B**

City

**INDIANAPOLIS**

State

**IN**

ZIP Code

**46224**

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

**15 00 00**

**6 00 00**

**9 00 00**

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

**09 23 2013**

**09 23 2016**

% (apr)

☒ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

**SUBTOTALS** This Period This Page (optional) ▶

**TOTALS** This Period (last page in this line only) ▶

**900.00**

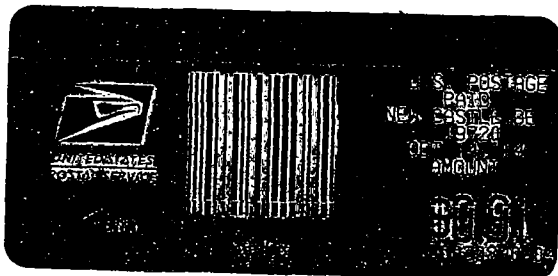
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

11-11-2013 11:00:17



14001 JUN 10010

SUPER PAC  
K 729  
H GROVE, IN 46007



Federal Election Commission  
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WASHINGTON, DC 20463  
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